

NEVADA DEPARTMENT OF CORRECTIONS	SERIES 600 HEALTH CARE SERVICES	SUPERSEDES: AR 635 (10/27/02)
ADMINISTRATIVE REGULATIONS MANUAL	ADMINISTRATIVE REGULATION 635 MEDICATION DISTRIBUTION, CONTROL AND SECURITY AND OVER-THE-COUNTER MEDICATIONS	EFFECTIVE DATE: 12/17/03

TABLE OF CONTENTS

	<u>PURPOSE</u>	
	<u>AUTHORITY</u>	
	<u>RESPONSIBILITY</u>	
	<u>DEFINITIONS</u>	
	<u>APPLICABILITY</u>	
	<u>PROCEDURES</u>	
<u>635.01</u>	MEDICATION DISTRIBUTION, CONTROL AND SECURITY	
<u>635.02</u>	OVER-THE-COUNTER MEDICATIONS	
	<u>REFERENCES</u>	
	<u>ATTACHMENTS</u>	
	<u>MANDATORY REVIEW DATE</u>	<u>10/27/04</u>

PURPOSE

To ensure that prescription medications are provided to inmate patients in a safe and timely manner.

To ensure controlled substances will be stored and administered pursuant to all applicable laws and regulations.

APPLICABILITY

Applies to all inmates within the Department who are allowed to receive over-the-counter medications.

AUTHORITY

Nevada Pharmacy Law
Nevada Nurse Practice Act
Nevada Administrative Code 639
NRS 209.131
NRS 454.215

DEFINITIONS

ADMINISTRATION OF MEDICATION – The direct, single dose application of a medication to the body of a patient whether by injection, ingestion, or any other means.

AUTOMATIC STOP ORDER – A drug order is stopped after a predetermined time.

CONTROLLED SUBSTANCE – Narcotics, psychotropics, and/or prescription pain medications.

DELIVERING/DISTRIBUTION MEDICATION – To furnish packaged prescriptions, which have been dispensed by the Departmental Pharmacist, to a patient for self-administration. These may not be opened or repackaged by other personnel.

DISPENSING MEDICATION – The furnishing of a prescribed medication in any amount greater than that which is necessary for the present and immediate needs of the ultimate user, i.e., multiple doses.

FORMULARY – A list of medications approved for prescribing and administering to the inmate population.

KEEP ON PERSON (KOP) – Medications which may be kept on person by the inmate for self-administration.

OVER-THE-COUNTER (OTC) – A medication requiring a Department health care professional or a written protocol to be provided to inmates, but is not a prescribed medication.

PSYCHOTROPIC MEDICATION – Medication prescribed for the treatment of a specific mental illness, disease, or defect.

QUALIFYING INMATE PATIENTS – One who is mentally or physically reliable and capable of self-administration of medication.

RESPONSIBILITY

All Medical Division Staff are responsible to have knowledge of and comply with this regulation.

APPLICABILITY

Applies to all Medical Division Staff who are responsible for providing medications to inmates.

PROCEDURES

635.01 MEDICATION DISTRIBUTION, CONTROL AND SECURITY

1.1 All controlled substances will be administered by licensed medical professional personnel and by single doses only at the time prescribed by the physician, mid-level practitioner, or dentist **(3-4342)**.

1.1.1 These agents will not be administered in multiple doses, nor will they be in the possession of a patient in multiple doses.

1.2 Inmate patients who are mentally and physically capable will have the privilege of self-administering some medications.

1.2.1 This policy applies to all qualifying inmates in the custody of the Department except those who receive narcotics, psychotropic and/or prescription pain medications, which include all medications listed on Schedule I-V, and those not on Schedule I-V but have small amounts of opiates, barbiturates, Benzodiazepines, sedatives, hypnotics, or other CNS depressants or stimulants.

1.2.2 Any inmate patient who abuses this privilege will be immediately re-evaluated and may have their medication discontinued or self-administration privileges revoked at the discretion of the physician.

1.3 Dispensing

1.3.1 All prescription medication will be dispensed by a Department pharmacist or a registered nurse per NRS 454.215. Physicians and mid-level practitioners may dispense in urgent cases as permitted by law. **(3-4341 and 3-4342)**

1.3.2 All prescription medication, excluding controlled substances, may be dispensed in quantities of up to 30 days supply to qualifying inmate patients.

1.3.3 Qualifying inmate patients who have been on a medication for a chronic condition may have up to one (1) years supply re-ordered, to be dispensed in 30 day increments for KOP.

1.3.4 Department staff may provide over-the-counter products per written procedure and protocols.

1.3.5 Per the Pharmacy Board regulations a Registered Nurse (RN) may not dispense medications exceeding a 96-hour supply. Licensed Practical Nurses (LPN) are not permitted to dispense medications.

1.3.6 The following time intervals for various drug classifications are in effect for automatic stop orders:

- Narcotics 3 days, no KOPs
- Antibiotics 10 days, unless otherwise ordered by the physician.
- Anticoagulants 30 days
- Anti-emetics 7 days
- Cold and cough preps 7 days
- Psychotropics 90 days, no KOPs, except SSRIs at the discretion of the prescribing physician.
- All others Up to one (1) year at the discretion of prescribing physician.

1.3.7 A medication order will have an automatic stop unless:

- The order indicates a specific number of doses to be given;
- An exact period of time for the administration of the drug is indicated; or
- The attending physician reorders the drug.

1.4 Administering

1.4.1 Thirty (30) day supplies of medications may be delivered by licensed medical personnel only, i.e., physicians, mid-level practitioners, registered nurses.

1.4.2 Narcotics, psychotropics, and prescription pain medication

- Will be administered by physicians, mid-level practitioners, and registered nurses by single dose only at the times ordered by the physician.
- These agents will not be dispensed in multiple doses or be in the possession of inmate patients in multiple doses.
- Staff will observe inmates swallowing medications.

1.4.2 Narcotics and prescription pain medications with a narcotic classification will not be dispensed to inmates who are in the general population, these medications are to be administered in the infirmaries under direct supervision of Medical Staff only.

1.4.3 Chemo prophylaxis medication, for inmates who have tested positive on PPD skin

testing, will be administered under direct supervision of Medical Staff only.

1.4.5 These medications may not be opened or repackaged by non-Medical personnel.

1.5 Monitoring

1.5.1 Inmate patients may obtain prescription medication and/or refills by writing a Medical Kite and/or Service Report, DOC-2500, to the infirmary/clinic requesting such within 10 days of running out.

1.5.2 Inmates may receive 30-day refills after the initial prescription for up to one (1) year at the discretion of the prescribing physician with the exception of psychotropic medications.

1.5.3 Inmates on psychotropic medication may receive 30-day refills after the initial prescription for up to 90-days at the discretion of the prescribing physician.

1.5.4 If the inmate is diagnosed at sick call as needing chronic medication, they will be given a regular appointment for follow-up and further evaluation as directed by the attending physician or mid-level practitioner.

1.5.5 All psychotropic medication will be reviewed no less than every 30 days and the patient must be seen at least every 90 days for any refills.

1.6 Controlled Substances

1.6.1 There will be a joint count by the on-coming and off-going nurses at each shift change, i.e., there will be a count a minimum of two (2) times per day and document the count on the shift count sheet.

- Off-going nurses will not leave until the count is correct.
- The Medical Director may schedule and/or conduct unannounced spot checks of the controlled substances and syringe counts.
- A designated Pharmacist and a Warden's designee will verify inventory and accuracy of the count on a monthly basis.
- If the narcotics and syringe count cannot be verified as correct at any of the shift-change counts, the Department Pharmacist and regional Chief of Nursing Services must be notified immediately and all involved staff must stay on-site until the problem is rectified or permission to leave is given by the regional Chief of Nursing Services.

1.7 Storage of Controlled Substances

- All controlled substances must be kept under double lock and key, a key will be held by the Director of Nursing Services/designee and the Charge Nurse.

1.8 Documentation

1.8.1 All prescription medication refills will be documented on the Continuing Medication Record, DOC-2545, in the inmate's medical file.

1.8.2 In addition, all medications that are administered to the patient in single dose, whether inpatient or outpatient, will be documented on the PRN and One-Time Medication Sheet, DOC-2564, at the time each dose is administered.

1.8.3 If necessary, the medication sheets will be taken to the lockdown units by the nurse so the medication may be charted at the time of administration.

1.8.4 All scheduled medications will be documented on the Continuing Medication Sheet, DOC-2545, at the time of administration.

1.8.5 A precise record must be kept on the Controlled Substance Record, DOC-2528, of each dose of a controlled substance administered.

- These recordings must be made at the time of administration of the drug.
- This form must be completed in all detail and returned to the pharmacist when completed.

1.8.6 Unused portions of medications or outdated medications will be returned to the pharmacy with the corresponding Controlled Substance Record, DOC-2528.

1.8.7 The number in the upper right hand corner of the Controlled Substance Record must correspond to the number on the container.

1.8.8 Syringes and needles will be recorded on the Controlled Substance Record, DOC – 2528, in the same manner as medications are recorded and the count will be maintained accurately.

6035.02 OVER-THE-COUNTER MEDICATIONS

1.1 The Department will provide inmates with over-the-counter medications on an as needed basis.

1.2 Over-the-counter medications may be dispersed in institution and facilities by the Department staff and may be sold in supervised inmate canteens of the Department.

1.3 The types of over-the-counter medications that may be distributed in the institution/facility or sold in the inmate canteen must be approved by the Medical Director. No additions will be made without the approval of the Medical Director.

1.4 Over-the-counter medications, which are not dispensed by Medical Division staff, may be distributed in housing areas and work areas by staff designated by the Medical Director or Warden.

1.4.1 The Director of Nursing Services or the Facility Manager, where nursing staff is not available, will be responsible for maintaining a logbook of all over-the-counter medications issued to the housing and work areas.

1.4.2 The logbook will include:

- Date requested;
- Date issued;
- Unit;
- Type and quantity of the over-the-counter medication issued; and
- Initials of the person filling the requested order.

1.4.3 Requests for refills of over-the-counter medications will be made in writing to the Director of Nursing Services or the Facility Manager by designated staff. Verbal requests for refills will not be honored. Written requests will include:

- Date requested;
- Housing Unit;
- Items requested; and
- Designated staff signature (when received).

1.4.4 The Director of Nursing Services/Facility Manager will monitor all refill requests for any abuse, misuse, or pilfering.

1.4.5 The institutional Unit Officer will be responsible for maintaining the OTC Medication Log, DOC-2588, of all over-the-counter medications issued to inmates. The log will include:

- Inmate's name and DOC number;
- Date and time issued;
- Medication and amount issued;
- Officer's name and any comments.

1.4.6 The completed logbooks will be forwarded to the Director of Nursing Services or the Facility Manager for retention storage.

1.4.7 Shift supervisors will, on a periodic basis, inspect the OTC Medication Log in the units to ensure that they are properly completed and to ascertain if any problems exist, such as attempted abuse of OTC medications by inmates or staff.

1.4.8 Unit officers should make these medications available as determined by the Medical Director. Over-the-counter medications will be given per directions only, i.e., two aspirin at a time, not three or four. **(3-4341)**

1.4.9 If the use of these medications does not rectify an apparent medical problem, the inmate should submit a Medical Kite and/or Service Report, DOC-2500, requesting to be seen by Medical Division staff. Unit officers are not to give medical advice.

1.4.10 Unit officers who suspect abuse or misuse of these medications may withhold issuance to the particular inmate and notify the Director of Nursing Services or Facility Manager.

1.5 Inmates who have money in their inmate accounts should be encouraged to purchase their own over-the-counter medications from the inmate canteen.

REFERENCES

ACA Standards 3-4341, 3-4342

ATTACHMENTS

Continuing Medication Record, DOC-2545

Controlled Substance Record, DOC-2528

Medical Kite and/or Service Report, DOC-2500

PRN and One-Time Medication Sheet, DOC-2564

Jackie Crawford, Director

Date

Ted D'Amico, D.O., Medical Director

Date

CONFIDENTIAL

Yes

XX
No

THIS PROCEDURE SUPERSEDES ALL PRIOR WRITTEN PROCEDURES ON THIS SPECIFIC SUBJECT.